Section 115.35 Rev. 12/94

PHYSICAL AND MENTAL RESTORATION SERVICES

I. LEGAL AUTHORITY:

Rehabilitation Act Amendments of 1992 and 1993; 34 CFR 361.42(a)(3)(b); RSM 1513-1523.

II. POLICY STATEMENT AND PURPOSE:

The Office of Rehabilitation Services provides physical and mental restoration services to enable individuals with disabilities to eliminate, reduce, or modify functional limitations which present barriers to employment. These services are provided for the following reasons: (1) to determine whether vocational rehabilitation services can result in an employment outcome and (2) to achieve an employment outcome. In addition to the services listed within this section, other physical or mental restoration services may be provided upon the recommendations of the medical consultant.

All physical and mental restoration services are contingent upon availability of funds.

A. Definitions

- 1. Durable Medical Equipment equipment prescribed by a physician with a shelf life of more than a year designed to overcome the functional limitations imposed by a disability. Examples are: manual and power wheelchairs, orthotics, prosthetics, electric scooters, hearing aids, etc.
- 2. Physical Restoration any service, therapeutic or corrective, prescribed by a physician or certified/licensed therapist intended to eliminate, reduce, or substantially modify a physical or mental disability which is stable or slowly progressive, to enable an individual to achieve an employment outcome. Physical restoration may include certain acute conditions which interfere with an assessment of or the ability to benefit from vocational rehabilitation services or interfere with the realization of an employment outcome. Examples of physical restoration services include but are not limited to the following: physical therapy, occupational therapy, pain treatment, corrective surgery, speech therapy, cognitive therapy, prosthetics or orthotics, dental work, hospitalization, medical treatments, etc.
- 3. Mental Restoration any service, therapeutic or corrective, prescribed by a psychiatrist, psychologist, or licensed or certified psychotherapist or mental health counselor designed to enable an individual to achieve an employment outcome. Examples of Mental Restoration services include but are not limited to the following: counseling, psychotropic medications, behavioral modifications, etc.

B. Criteria

- 1. In order to receive physical or mental restoration services, the individual with a disability must have a condition which is stable or slowly progressive to allow such services to remove, correct, substantially reduce, or modify the barrier(s) to employment.
- 2. These services are available in extended evaluation to determine ability of the individual with a disability to benefit from vocational rehabilitation services to achieve an employment outcome. However, the criterion that the disability must be stable or slowly progressive does not apply under an extended evaluation since determining the nature of the disability is part of the extended evaluation process.
- 3. All physical and mental restoration services provided to an individual with a disability must be provided for the sole purpose of reducing the effects of the disability in achieving an employment outcome, or they must enhance the individual's ability to benefit from Vocational Rehabilitation Services to achieve an employment outcome.

D. Conditions and Limitations

- 1. Organ Transplants the Agency will consider an organ transplant only if there is clear and convincing evidence that such a transplant will remove the barrier to achieving an employment outcome.
- 2. Medical or Corrective Surgical Treatment Upon the recommendation of a physician to treat or correct a condition, whether or not treatment is for the major disabling condition, the Agency may authorize such treatment or corrective treatment subject to review and recommendation by its Medical Consultant.
- 3. Chiropractic Treatment Such treatment is allowable only for spinal subluxation or spinal manipulation if there are no contraindications.
- 4. Podiatry Podiatry is approvable to correct problems of the feet which substantially impede employment outcomes.
- 5. Psychotherapy The Agency may provide up to twenty (20) sessions of therapy. The therapist is required to submit a progress report at the completion of ten sessions and a final report at the completion of the 20 sessions. Occasions may arise where an extension beyond twenty sessions would seem justified and consistent with the employment outcome. At such times, the Agency. consultant may make a recommendation to continue.

- 6. Dental Care The Agency may approve dental treatment, appliances, oral surgery or orthodontia as required to reduce or remove dental conditions which substantially impede the employment outcome.
- 7. Visual Services If the visual condition constitutes a substantial impediment to an employment outcome, visual services may be authorized. Types of visual services include but are not limited to: eye surgery and treatment, provision of eyeglasses, orthoptics, prosthetic devices, prescriptions of optical aids (including training on appropriate usage), etc. Contact lenses may be provided only if it can be documented that such lenses would result in better vision than the vision resulting from regular glasses.
- 8. Physical and Occupational Therapy The provision of treatment/training activities to restore, maintain, or improve functional skills necessary to effect an employment outcome may be approved subject to review and recommendation by the medical consultant. Therapy will continue only in cases where definite progress toward an employment goal is being made. Only in exceptional cases will therapy continue beyond one year.
- 9. Cosmetic Work dental, facial or other cosmetic work may be authorized only if directly related to the employment outcome.
- 10. Nursing Services Nursing services may be authorized only when prescribed by the treating physician for acute or critical conditions and only when directly impacting on successful employment outcomes.
- 11. Hospital Care Wherever possible, out-patient surgery or treatments must be utilized before in-patient surgery is approved.
- 12. Prescription Drugs and Medical Supplies These may be approved when prescribed by the treating physician or dentist and reviewed by the medical consultant to eliminate or reduce the effects of the disabling condition.
- 13. Speech Therapy Speech therapy may be authorized only if the need is indicated as a means of effecting an employment outcome.

III. PROCEDURES:

- A. The counselor must consider client choice in providing all physical and mental restoration services, including speech therapy. The client must balance individual choice with agency policy, procedures, and economic constraints.
- B. All vendors and other providers of services must meet the necessary licensing and other professional requirements (see Section 115.25).

RHODE ISLAND DEPARTMENT OF HUMAN SERVICES OFFICE OF REHABILITATION SERVICES POLICY AND PROCEDURES MANUAL

Section 115.35 Rev. 12/94

- C. Key elements in providing physical and mental restoration services during the rehabilitation process include the following:
 - 1. An approved IPE
 - 2. Consultation with the appropriate medical or clinical consultant if necessary. When authorizing pain treatment, the counselor must obtain approval from both the medical and the psychiatric/psychological consultants. When physical restoration services include dental work, the counselor must have prior approval of the dental consultant. When authorization of services involves speech therapy, a speech evaluation by a certified Speech Pathologist is required (see III., D. below regarding limits).
 - 3. Exploration of comparable benefits and services (see Section 115.5).
 - 4. Compliance with the economic need criteria and completion of the economic need form (see Section 115.8).
 - 5. All authorizations must be in accordance with the Agency's fee schedule.
 - 6. When the primary assistance provided at the time consists of physical or mental restoration services, the counselor should place the case in Status 16 and note change of status in case dictation.
 - 7. For durable medical equipment valued at less than \$250, the worker will complete a T-2 to obtain a letter of authorization. For the purchase of such equipment in excess of that amount, the counselor must follow the following bidding procedures:
 - a. When physical restoration includes the recommendation for prescribed durable medical equipment over \$250.00 but less than \$1,000.00 in value, the counselor must obtain three (3) telephone/fax estimates for the cost of the equipment and complete the Agency's Bid Comparison Form documenting the three bids obtained.
 - b. If the cost of durable medical equipment exceeds \$1,000.00, the counselor must substantiate that s/he has obtained three (3) written competitive bids from approved vendors.
 - c. If the equipment is too customized to allow using the bidding process, the counselor must document this in the case record and list the selected vendor as a "sole source provider" on the Bid Comparison Form. In some cases, the counselor will be unable to obtain three bids; this should be noted on the Bid Comparison Form and in dictation.

RHODE ISLAND DEPARTMENT OF HUMAN SERVICES OFFICE OF REHABILITATION SERVICES POLICY AND PROCEDURES MANUAL

Section 115.35 Rev. 12/94

- d. The decision to award the bid will be made jointly by the counselor and the client, usually to the lowest bidder.
- e. Allowable reasons for awarding the bid to a vendor other than the lowest bidder might include but are not be limited to the following:
 - 1) production availability
 - 2) time constraints or restraints.
 - 3) minority owned business enterprise (bid may be 5% over lowest bid)
 - 4) client choice
 - 5) improper or inferior warranty
 - 6) follow-up and maintenance availability

If the selected vendor is not the lowest bidder this must be justified in dictation as well as the on the bid form.

D. Provision of Speech Therapy

- 1. If the speech evaluation shows promise of possible improvement in speech, authorization will be made for a period of 30 days initially, with a maximum of five (5) one-hour sessions per week.
- 2. A report will be sent to the counselor following this period of treatment and at that time a decision will be made by the counselor with the assistance of the medical consultant as to the feasibility of continuing speech therapy.
- 3. If future therapy is approved, it will be authorized in three-month segments at the rate of one session per week with a report following each three-month period. In rare instances two sessions per week may be necessary for a limited period of time. This may be authorized following special approval of the Medical Consultant and the Supervisor.
- 4. Therapy will continue only in cases where definite progress is made. Only in exceptional, documented cases will therapy be continued beyond one year.